



DEC-03-2007 MON 05:26 PM CANTOR COLBURN LLP

FAX NO. 8602860115

P. 02

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**
Commissioner for Patents
P.O. Box 1450
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23413 7590 09/06/2007

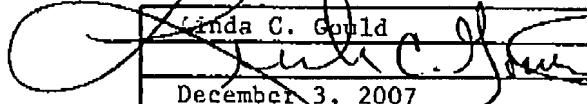
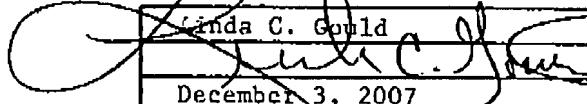
CANTOR COLBURN, LLP
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BLOOMFIELD, CT 06002

12/04/2007 HDEMESS2 00000056 061130 10694653

01 FC:1501 1440.00 DA
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.


 Linda C. Gould (Depositor's name)

 Linda C. Gould (Signature)
 December 3, 2007 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/694,653	10/27/2003	Naoto Moriyama	KOY-0018	3994

TITLE OF INVENTION: MEDICAL IMAGE RADIOGRAPHING SYSTEM AND PORTABLE RADIOGRAPHING INFORMATION APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	-\$1400-	\$1440	\$300	\$0	-\$1700 \$1740 12/06/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
BITAR, NANCY	2624	382-132000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 CANTOR COLBURN LLP 2 _____ 3 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Konica Minolta Holdings, Inc.

Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies Five (5)

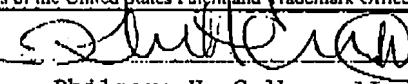
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A check is enclosed.
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 06-1130 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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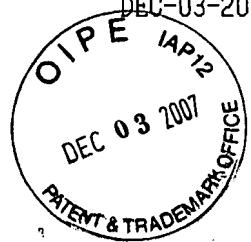
Date December 3, 2007

Typed or printed name Philmore H. Colburn II

Registration No. 35,101

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CANTOR COLBURN LLP
INTELLECTUAL PROPERTY ATTORNEYS
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FACSIMILE TRANSMITTAL SHEET

DATE: December 3, 2007
TO: ISSUE FEE
COMPANY: U.S. PATENT AND TRADEMARK OFFICE
FAX NO.: (571) 273-2885 TEL. NO.: _____

FROM: Linda C. Gould (Cantor Colburn LLP)
OUR REF: KOY-0018 YOUR REF: USSN 10/694,653

TOTAL NUMBER OF PAGES SENT 2
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COMMENTS: TO WHOM IT MAY CONCERN:

Please find enclosed the Base Issue Fee and Publication Fee Transmittal Form for U.S. Serial No. USSN 10/694,653. Also find enclosed an Advance Order of FIVE (5) Patent copies.

Please charge the Issue Fee, Publication Fee and Advance Order Fee to Deposit Account 06-1130 (\$1,755).

Thank you,
CANTOR COLBURN LLP

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